

ROOM CONFINEMENT REPORT

not all fields would let data be entered

REPORT INFORMATION

JUVENILE INFORMATION

DATE	TIME	REPORTING STAFF NAME	JUVENILE FACILITY NAME	JUVENILE NAME	SEX	AGE	RACE
7/12/2016	12:30pm	Cher	Norfolk Group Home		Female	17	White



If Multi-Race, Indicate up to 3	ETHNICITY	<u>DATE PLACED IN</u> ROOM CONFINEMENT	<u>LOCATION OF</u> ROOM CONFINEMENT	<u>TIME PLACED IN</u> ROOM CONFINEMENT	ROOM LOCKED OR UNLOCKED	TIME REMOVED	NAME OF SUPERVISOR WHO GAVE APPROVAL
White	Not Hispanic,	12-Jul					Sandy McGrath

CONFINEMENT INFORMATION

TOTAL HOURS IN CONFINEMENT	REASON FOR ROOM CONFINEMENT	WHY <u>LESS</u> RESTRICTIVE MEANS WERE UNSUCCESSFUL	STAFFING LEVELS AT TIME OF CONFINEMENT	INCIDENTS OF SELF HARM/ SUICIDE WHILE ON ROOM CONFINEMENT	TIME & DATE OF ATTEMPT TO RETURN JUVENILE TO GENERAL POPULATION
20 minutes	Physically assaulted and	needed time to calm	do 5 to 12	none	7/12/16 at 12:50pm



REASONS ATTEMPTS WERE UNSUCCESSFUL	EVALUATION PERFORMED (TYPE)	EVALUATION RESULTS	CORRECTIVE MEASURES FOR STAFF NONCOMPLIANCE
	na	none	na